PTO/SB/22 (07-09)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number (Optional)			
FY 2009				4986-0103PUS1			
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)							
Application Number 10/531,520-Conf. #9089				Filed No	vember 16, 2005		
For	For APPARATUS FOR INTRODUCING BIOLOGICAL MATERIAL, METHOD OF INTRODUCING BIOLOGICAL MATERIAL AND MAGNETIC SUPPORT FOR INTRODUCING BIOLOGICAL MATERIAL						
Art Unit 1797				Examiner	N. A. Bowers		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
			Fee	Small Entity Fee			
	One m	onth (37 CFR 1.17(a)(1))	\$130	\$65	\$		
	Two m	onths (37 CFR 1.17(a)(2))	\$490	\$245	\$		
	X Three	months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ 555.	.00	
	Four m	onths (37 CFR 1.17(a)(4))	\$1730	\$865	\$		
	Five m	onths (37 CFR 1.17(a)(5))	\$2350	\$1175	\$		
X Applicant claims small entity status. See 37 CFR 1.27.							
A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448							
WARNING: Information on this form may become public. Credit card information should not be included on this form.							
Provide credit card information and authorization on PTO-2038.							
am the applicant/inventor.							
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
attorney or agent of record. Registration Number			30,330				
	attorper or agrept under 37 CFR 1.34.						
		Registration number if acting u	inder 37 CFR 1.34				
(SM				November 18, 2010			
Signature				Date			
Leonard R. Svensson			(858) 792-8855				
Typed or printed name				Telephone Number			
NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) ere required. Submit multiple forms if more than one signature is required, see below.							
	Total of	1 forms are sub	mitted.				